Fill	in this information to identify your ca	ase:				1						
	otor 1 LeRoy N. Bu											
l	otor 2				_							
Uni	ted States Bankruptcy Court for the	NORTHERN DISTRIC	CT OF OHIO									
l .	se number 17-60436		-				ck if this is an amenda a supplem	ed 1	U	ing postpetit	ion c	hapter
\bigcirc	fficial Form 106l					_				following da	ite:	
	-					N	/MM / DD/ `	ΥY	Υ			
	chedule I: Your Income complete and accurate as poss											12/1
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.	r spouse is not filing w	ith you, do not inclu	de inforr	nati	on abou	t your sp	ous	e. If r	nore space	is ne	eded,
1.	Fill in your employment information.		Debtor 1				Debtor	2 o	r non-	-filing spous	se	
	If you have more than one job,	Fundament status	☐ Employed		☐ Empl	loye	ed					
	attach a separate page with information about additional	Employment status	■ Not employed		☐ Not employed							
	employers.	Occupation	Occupation retired									
	Include part-time, seasonal, or self-employed work.	Employer's name										
	Occupation may include student or homemaker, if it applies.	Employer's address										
		How long employed t	here?									
Par	t 2: Give Details About Mor	nthly Income					_					
	mate monthly income as of the dause unless you are separated.	ate you file this form. If	you have nothing to re	eport for	any	line, write	e \$0 in the	e sp	ace. I	nclude your	non-	filing
•	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the informatio	n for all e	emplo	oyers for	that perso	on (on the	lines below.	. If yo	u need
						For De	btor 1			ebtor 2 or iling spous	е	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	-	\$	N/	Ά_	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00		+\$	N/	A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$		0.00		\$_	N/A	_	

Deb	otor 1	LeRoy N. Butler	-	(Jase r	number (<i>if ki</i>	nown) _	17-60	436		
					For	Debtor 1				Debtor :		
	Cop	y line 4 here	4.		\$		0.00)	\$	filing s	pouse N/A	
_								_				<u> </u>
5.		all payroll deductions:										
	5a.	Tax, Medicare, and Social Security deductions	5a		\$		0.00	_	\$		N/A	_
	5b.	Mandatory contributions for retirement plans	5b		\$		0.00	_	\$		N/A	_
	5c. 5d.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	5c 5d		\$ \$		0.00 0.00	_	\$		N/A	_
	5e.	Insurance	5e		\$).00).00	_	\$ 		N/A	_
	5f.	Domestic support obligations	5f.		\$		0.00	_	\$		N/A	_
	5g.	Union dues	5g] .	\$		0.00	_	\$		N/A	_
	5h.	Other deductions. Specify:		1.+	\$		0.00		\$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	(0.00)	\$		N/A	1
7.	Calc	sulate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	(0.00	_)	\$		N/A	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a		\$	142	2 00		\$		N/A	
	8b.	Interest and dividends	8b		\$ _		2.00 0.00	_	\$ 		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c) .	\$		0.00	<u> </u>	\$		N/A	_
	8d.	Unemployment compensation	8d	i.	\$	(0.00)	\$		N/A	_
	8e.	Social Security	8e	€.	\$	2,12	5.00)	\$		N/A	<u>. </u>
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g		\$	(1,20°	0.00		\$		N/A N/A	_
	8h.	Other monthly income. Specify:	_		\$ -		0.00	_	· \$—		N/A	_
	0						J.U.	<u>-</u> -	_		14/7	<u>_</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	3	<u> </u>	3,468	3.53	3	\$		N/	A
10.	Calc	culate monthly income. Add line 7 + line 9.	10.	\$		3,468.53	+	\$		N/A	= \$	3,468.53
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		· –		, 100.00		_			Ľ-	0,100.00
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your rifiends or relatives. In it include any amounts already included in lines 2-10 or amounts that are not cify:	depe		•	•				chedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailes								12.	\$	3,468.53
13.	Do v	ou expect an increase or decrease within the year after you file this form	?							L	Combi month	ned ly income
		No. Yes. Explain:										

Fill	in this informa	tion to identify yo	our case:								
	tor 1						CI	راه م	if this is:		
Den	IOI I	LeRoy N. Bu	tier						n amended filing		
Deb	tor 2								•	ving postpetition cha	pter
(Spc	ouse, if filing)							1	3 expenses as of	the following date:	
Unit	ed States Bankr	ruptcy Court for the	: NORTH	IERN DISTRICT OF	ОНО			N	IM / DD / YYYY		
_	e number 17	7-60436									
Of	fficial Fo	rm 106J									
Sc	hedule	J: Your	Exner	1888							12/15
Be info nun	as complete a ormation. If m mber (if know	and accurate as lore space is ne n). Answer ever	possible eded, atta y questio	. If two married pe ch another sheet t						or supplying correct rour name and case	
Par 1.	t 1: Descr Is this a joir	ribe Your House	hold								
1.	■ No. Go to □ Yes. Doe	o line 2. es Debtor 2 live i	•	ate household? al Form 106J-2, <i>Ex</i> ,	penses f	or Separate House	<i>hold</i> of D	ebto	r 2.		
2.	Do you have	e dependents?	□ No								
_	Do not list D Debtor 2.	•	Yes.	Fill out this information		Dependent's relati Debtor 1 or Debtor			Dependent's age	Does dependent live with you?	
	Do not state dependents					Daughter			40	□ No ■ Yes	
	черепчень	names.								□ No	
										☐ Yes	
										□ No	
										☐ Yes	
										☐ No	
•	_									☐ Yes	
3.	expenses o yourself and	penses include f people other t d your depende	han nts? □	No Yes							
Est exp	imate your ex		our bankr	uptcy filing date ur						pter 13 case to rep f the form and fill ir	
the		h assistance an		government assist cluded it on <i>Sched</i>					Your expe	enses	
4.		or home owners		ses for your resident	ence. Ind	clude first mortgage	e 4.	\$		0.00	
	If not include	led in line 4:									
	4a. Real e	estate taxes					4a.	\$		0.00	
		rty, homeowner's	s, or renter	's insurance			4b.			130.00	
		•	-	ıpkeep expenses			4c.	\$		50.00	
_		owner's associat					4d.			0.00	
5.	Additional r	mortgage payme	ents for yo	our residence, such	n as hom	e equity loans	5.	\$		0.00	

Debt	or 1	LeRoy N	N. Butler	Case nu	mber (if known)	17-60436				
6.	Utilit	ies:								
	6a.		, heat, natural gas	68	a. \$	260.00				
	6b.	Water, sev	ewer, garbage collection	61	o. \$	60.00				
	6c.	Telephone	e, cell phone, Internet, satellite, and cable services	60	c. \$	35.00				
	6d.	Other. Spe	ecify:	60	d. \$	0.00				
7.	Food	and hous	sekeeping supplies	7	7. \$	583.00				
8.	Child	care and c	children's education costs	8	3. \$	0.00				
9.	Cloth	ning, laund	dry, and dry cleaning	Ç	9. \$	148.00				
10.	Pers	onal care p	products and services	10). \$	61.00				
			ental expenses	11	I. \$	100.00				
12.	Trans	sportation.	Include gas, maintenance, bus or train fare.							
			car payments.		2. \$	400.00				
13.	Ente	rtainment,	clubs, recreation, newspapers, magazines, and boo	ks 13	3. \$	100.00				
14.	Char	itable cont	tributions and religious donations	14	l. \$	0.00				
		rance.								
			nsurance deducted from your pay or included in lines 4 c							
		Life insura			a. \$	0.00				
		Health ins			o. \$	0.00				
		Vehicle in			S. \$	136.57				
			urance. Specify:		d. \$	0.00				
			nclude taxes deducted from your pay or included in lines							
			erty Taxes on 198 Helen	16	S. \$	59.11				
			erty Taxes on 264 Harker		\$	14.42				
			lease payments:	17.	. ф	0.00				
			nents for Vehicle 1		a. \$	0.00				
			nents for Vehicle 2). \$	0.00				
		Other. Spe			c. \$	0.00				
		Other. Spe	•		d. \$	0.00				
			s of alimony, maintenance, and support that you did a your pay on line 5, Schedule I, Your Income (Official		3. \$	0.00				
			s you make to support others who do not live with you	1 01111 1001/.	\$	0.00				
	Spec		s you make to support official who do not hive with y	5 u. 19	·	0.00				
			perty expenses not included in lines 4 or 5 of this for							
			s on other property		a. \$	0.00				
		Real estat		20k	o. \$	0.00				
	20c.	Property,	homeowner's, or renter's insurance	200	c. \$	0.00				
			nce, repair, and upkeep expenses	200	I. \$	0.00				
			ner's association or condominium dues	206	e. \$	0.00				
		r: Specify:			l. +\$	0.00				
	Otilio	ii opoony.	-		- Ψ	0.00				
22.		•	monthly expenses							
			through 21.		\$	2,137.10				
	22b.	Copy line 2	22 (monthly expenses for Debtor 2), if any, from Official F	orm 106J-2	\$					
	22c.	Add line 22	2a and 22b. The result is your monthly expenses.		\$	2,137.10				
00	0-1		mandh han a tha a ann a			,				
		•	monthly net income.	00.	. ф	0.400.50				
			12 (your combined monthly income) from Schedule I.		a. \$	3,468.53				
	23D.	Copy your	r monthly expenses from line 22c above.	230	o\$	2,137.10				
	220	Subtract	your monthly expenses from your monthly income							
	230.		your monthly expenses from your monthly income. t is your monthly net income.	230	s. \$	1,331.43				
		THE TESUIT	tio your monuny not moonto.		<u> </u>	· .				
24.	Do y	ou expect	an increase or decrease in your expenses within the	year after you file th	is form?					
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a									
			e terms of your mortgage?							
	■ Ye	es.	Explain here: Debtor anticipates that his social	security benefit w	III decrease v	vnen he turns age 62.				